

**Breastfeeding and Infant Assessment According to the
American Academy of Pediatrics' Policy Statement
Breastfeeding and the Use of Human Milk (2012)**

Mother's Name _____ DOB _____

Infant Name _____ DOB _____ Birth Weight _____

Date of Evaluation: _____ Infant age in days _____

Weight _____ % weight ____ (Gain/Loss)

Maternal hx: Prior to Pregnancy _____

Pregnancy _____

Postpartum: (how much bleeding) _____

Breast/chest surgery ____ Breast changes in Pg ____ Breast changes since delivery _____

Infant hx: Problems during pregnancy _____

Problems at delivery _____

Jaundice Visible (Yes/No) Recommended testing (yes/no) Results _____

Signs of dehydration (Yes/No) Explain: _____

Elimination pattern : ____ # Wet in last 24 hours ____ # Stool _____ Stool color and consistency

Mother reports giving fluids other than breast milk (yes/no) What _____

Mother reports infant spitting up or "leaking" breast milk from mouth while feeding (yes / no)

Observation of breastfeeding: encourage mother to allow skin to skin time and have baby lead!

1. Mother reports her breast have felt full (after / before day 3	yes	no)
2. Nipples (everted flat inverted)		
3. Nipple skin status (normal pink reddened bleeding cracked)		
4. Baby demonstrating interest (yes sleepy needed encouragement unable to awaken)		
5. Baby able to grasp nipple and beyond to the breast (yes only nipple refused to latch)		
6. Baby's lips everted (yes no) (only upper / only lower)		
7. Mother reports no pain (yes no)		
8. Swallowing heard (yes no) x _____ minutes		
9. At the end of the feeding, baby (lets go with signs of satiation appears fussy)		
10. Mother reports she feels the feeding went well (yes no)		
11. Time mother reports feedings usually last: (1- 5Min 5-10Min. 10-20Min. 30-40Min. 1 hr or more)		

Milk transfer measured (yes/no) _____

Mother reports this is a typical breastfeeding (yes/no)

Anticipatory guidance provided:

Follow-up plans:

Referrals made:

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If a second visit is deemed appropriate:

Date of Visit _____ Weight _____ % weight gain or loss _____

Signs of dehydration (Yes/No) Explain: _____

Elimination pattern : _____ Stool _____ Wet in last 24 hours

Mother reports giving fluids other than breast milk (yes/no) What _____

Mother reports infant spitting up or "leaking" breast milk from mouth while feeding (yes/no)

Observation of breastfeeding:

1. Mother reports her breast have felt full (after / before day 3	yes	no)
2. Nipples (everted flat inverted)		
3. Nipple skin status (normal pink reddened bleeding cracked)		
4. Baby demonstrating interest (yes sleepy needed encouragement unable to awaken)		
5. Baby able to grasp nipple and beyond to the breast (yes only nipple refused to latch)		
6. Baby's lips everted (yes no) (only upper / only lower)		
7. Mother reports no pain (yes no)		
8. Swallowing heard (yes no) x _____ minutes		
9. At the end of the feeding, baby (lets go with signs of satiation appears fussy)		
10. Mother reports she feels the feeding went well (yes no)		
11. Time mother reports feedings usually last: (1– 5Min 5–10Min. 10–20Min. 30–40Min. 1 hr or more)		

Anticipatory guidance provided:

Follow-up plans:

TABLE 5 Recommendations on Breastfeeding Management for Healthy Term Infants

- Exclusive breastfeeding for about 6 mo
 - Breastfeeding preferred; alternatively expressed mother's milk, or donor milk
 - To continue for at least the first year and beyond for as long as mutually desired by mother and child
 - Complementary foods rich in iron and other micronutrients should be introduced at about 6 mo of age
- Peripartum policies and practices that optimize breastfeeding initiation and maintenance should be compatible with the AAP and Academy of Breastfeeding Medicine Model Hospital Policy and include the following:
 - Direct skin-to-skin contact with mothers immediately after delivery until the first feeding is accomplished and encouraged throughout the postpartum period
 - Delay in routine procedures (weighing, measuring, bathing, blood tests, vaccines, and eye prophylaxis) until after the first feeding is completed
 - Delay in administration of intramuscular vitamin K until after the first feeding is completed but within 6 h of birth
 - Ensure 8 to 12 feedings at the breast every 24 h
 - Ensure formal evaluation and documentation of breastfeeding by trained caregivers (including position, latch, milk transfer, examination) at least for each nursing shift
 - Give no supplements (water, glucose water, commercial infant formula, or other fluids) to breastfeeding newborn infants unless medically indicated using standard evidence-based guidelines for the management of hyperbilirubinemia and hypoglycemia
 - Avoid routine pacifier use in the postpartum period
 - Begin daily oral vitamin D drops (400 IU) at hospital discharge
- All breastfeeding newborn infants should be seen by a pediatrician at 3 to 5 d of age, which is within 48 to 72 h after discharge from the hospital
 - Evaluate hydration (elimination patterns)
 - Evaluate body wt gain (body wt loss no more than 7% from birth and no further wt loss by day 5: assess feeding and consider more frequent follow-up)
 - Discuss maternal/infant issues
 - Observe feeding
- Mother and infant should sleep in proximity to each other to facilitate breastfeeding
- Pacifier should be offered, while placing infant in back-to-sleep-position, no earlier than 3 to 4 wk of age and after breastfeeding has been established

¹ Section on Breastfeeding, American Academy of Pediatrics: "Breastfeeding and the Use of Human Milk Policy Statement", PEDIATRICS Volume 129, Number 3, March 2012 downloaded 4/18/12 from: <http://pediatrics.aappublications.org/content/early/2012/02/22/peds.2011-3552>